

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H35481

**Entity Name:** GALLOWAY OFFICE SUPPLY, INC.

**Current Principal Place of Business:**

10201 NW 21 ST  
MIAMI, FL 33172

**Current Mailing Address:**

10201 NW 21 ST  
MIAMI, FL 33172 US

**FEI Number:** 59-2524876

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZASLOW, EDWIN BESQ  
17071 WEST DIXIE HWY  
NORTH MIAMI BEACH, FL 33160 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name TOURAL, JAIME  
Address 151 CRANDON BLVD, #723  
City-State-Zip: KEY BISCAYNE FL 33149

Title TD  
Name TOURAL, AMELIA  
Address 10425 SW 89TH PLACE  
City-State-Zip: MIAMI FL 33176

Title SD  
Name TOURAL, BEATRIZ  
Address 151 CRANDON BLVD, #723  
City-State-Zip: KEY BISCAYNE FL 33149

Title VP  
Name JAIME, TOURAL AIII  
Address 10201 NW 21 STREET  
City-State-Zip: MIAMI FL 33172

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMELIA TOURAL

**TREASURER**

**02/10/2023**

Electronic Signature of Signing Officer/Director Detail

Date